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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
	-	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Gina First name	First name	
Bring your picture identification to your meeting with the trustee.		Middle name Thomas Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3602		

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Case number (if known)

Debtor 1 Gina M Thomas

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live		If Debtor 2 lives at a different address:
		9147 S Burnside Chicago, IL 60619	
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Cook County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
ò .	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 Gina M Thomas

Par	Tell the Court About	our Ba	nkruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are			rief description of each, see go to the top of page 1 and o			C. § 342(b) for Individu	uals Filing for Bankruptcy
	choosing to file under	☐ Chapter 7						
		☐ Ch	apter 11					
		☐ Ch	apter 12					
		■ Ch	apter 13					
8.	How you will pay the fee		about how you order. If your a a pre-printed a	attorney is submitting your p address.	are paying ayment on	the fee yourself, your behalf, your	you may pay with cash attorney may pay with	n, cashier's check, or money n a credit card or check with
				the fee in installments. If ye in Installments (Official For		e this option, sign	and attach the Applica	ation for Individuals to Pay
			I request that but is not requ applies to you	t my fee be waived (You maired to, waive your fee, and ir family size and you are un	ay request may do so able to pay	o only if your incor y the fee in install	me is less than 150% of ments). If you choose to	of the official poverty line that this option, you must fill out
		1	tne <i>Applicatio</i>	n to Have the Chapter 7 Filii	ng Fee Wa	nived (Official Forr	n 103B) and file it with	your petition.
9.	Have you filed for bankruptcy within the last 8 years?	□ No. ■ Yes						
	•		-	Northern District of				
			District	Illinois	When	6/28/13	Case number	13-26585
			District		When		Case number	
			District		When		Case number	
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes	S.					
			Debtor				Relationship to y	ou
			District		When		Case number, if	known
			Debtor				Relationship to y	
			District		When		Case number, if	known
11.	Do you rent your residence?	■ No.	Go to li	ne 12.				
		☐ Yes	s. Has you	ur landlord obtained an evict	tion judgm	ent against you ar	nd do you want to stay	in your residence?
				No. Go to line 12.				
				Yes. Fill out <i>Initial Statemer</i> bankruptcy petition.	nt About ar	n Eviction Judgme	ent Against You (Form	101A) and file it with this

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Document Page 4 of 16 Case number (if known) **Gina M Thomas** Debtor 1 Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety?

Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 **Gina M Thomas** Page 5 of 16 Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Den	Gina W I nomas			Case no	umber (if known)			
Par	6: Answer These Quest	ions for Re	porting Purposes					
16.	What kind of debts do you have?	16a.		consumer debts? Consumer debts are resonal, family, or household purpose."	e defined in 11 U.S.C. § 101(8) as "incurred by an			
			☐ No. Go to line 16b.					
			■ Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you	owe that are not consumer debts or bu	siness debts			
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapte	er 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	☐ Yes.		Do you estimate that after any exempt available to distribute to unsecured cred	property is excluded and administrative expenses itors?			
	administrative expenses		□ No					
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do	1 -49		□ 1,000-5,000	□ 25,001-50,000			
	you estimate that you owe?	■ 1-49 □ 50-99		5001-10,000	☐ 50,001-100,000			
		☐ 100-19 ☐ 200-99		□ 10,001-25,000	☐ More than100,000			
19.	How much do you	S \$0 - \$5	50,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		1 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion			
			01 - \$500,000 01 - \$1 million	□ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
20.	How much do you estimate your liabilities	S \$0 - \$5	·	□ \$1,000,001 - \$10 million	\$500,000,001 - \$1 billion			
	to be?		01 - \$100,000 101 - \$500,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion			
		_ ` ′	101 - \$1 million	□ \$100,000,001 - \$500 million				
Par	7: Sign Below							
For	you	I have exa	amined this petition, and I de	eclare under penalty of perjury that the i	information provided is true and correct.			
				7, I am aware that I may proceed, if eligrelief available under each chapter, and	gible, under Chapter 7, 11,12, or 13 of title 11, d I choose to proceed under Chapter 7.			
If no attorney represents me and I did not pay or agree to pay so document, I have obtained and read the notice required by 11 U.								
		I request	relief in accordance with the	chapter of title 11, United States Code	, specified in this petition.			
		bankrupto and 3571	y case can result in fines up		ney or property by fraud in connection with a p 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,			
		Gina M	M Thomas Thomas of Debtor 1	Signature of D	Debtor 2			
		Executed	on March 17, 2017 MM / DD / YYYY	Executed on	MM / DD / YYYY			

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Debtor 1 Gina M Thomas

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Joseph R. Doyle	Date	March 17, 2017
Signature of Attorney for Debtor		MM / DD / YYYY
Joseph R. Doyle Printed name		
Bizar & Doyle, LLC		
Firm name		
123 West Madison Street		
Suite 205		
Chicago, IL 60602		
Number, Street, City, State & ZIP Code		
Contact phone 312-427-3100	Email address	joe@bizardoylelaw.com
6279065		
Bar number & State		

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Fill in this information to	dentify your case:		
United States Bankruptcy C	Court for the:		
NORTHERN DISTRICT OF	ILLINOIS		
Case number (if known)		Chapter you are filing under:	
		☐ Chapter 7	
		☐ Chapter 11	
		☐ Chapter 12	
		Chapter 13	☐ Check if this an amended filing
The bankruptcy forms use case—and in joint cases, to would be yes if either deby between them. In joint cas all of the forms. Be as complete and accur more space is needed, att.	you and Debtor 1 to refer to a debto hese forms use you to ask for inform or owns a car. When information is es, one of the spouses must report i	needed about the spouses separately, the information as <i>Debtor 1</i> and the other as <i>Debtor 1</i> are equally response are filing together, both are equally response.	
every question. Part 7: Sign Below			
For you	I have examined this petition, ar	nd I declare under penalty of perjury that the in	nformation provided is true and correct.
		napter 7, I am aware that I may proceed, if elignd the relief available under each chapter, and	
		d I did not pay or agree to pay someone who i read the notice required by 11 U.S.C. § 342(b	
, ,	I request relief in accordance wi	ith the chapter of title 11, United States Code,	specified in this petition.
		tement, concealing property, or obtaining mornes up to \$250,000, or imprisonment for up to	ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,
	Gina M Thomas Signature of Debtor 1	Signature of D	ebtor 2

Executed on

MM / DD / YYYY

Executed on March 17, 2017

MM / DD / YYYY

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Debtor 1 Gina M Thomas		Ca	se number (if known)
For your attorney, if you are epresented by one	under Chapter 7, 11, 12, or 13 of title 11, United for which the person is eligible. I also certify the	d States Code, and have at I have delivered to the	e informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)
f you are not represented by an attorney, you do not need o file this page.	and, in a case in which § 707(b)(4)(D) applies, schedules filed with the petition is incorrect.	certify that I have no know	wledge after an inquiry that the information in the
-	· .	Date	March 17, 2017
	Signature of Attorney for Debtor		MM / DD / YYYY
	Joseph R. Doyle		
	Printed name		
	Bizar & Doyle, LLC		
	Firm name		
	123 West Madison Street		
	Suite 205		
	Chicago, IL 60602		
	Number, Street, City, State & ZIP Code		
	Contact phone 312-427-3100	Email address	joe@bizardoylelaw.com

6279065 Bar number & State

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Fill in this inform	nation to identify your	case:			
Debtor 1	Gina M Thomas		-		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official Form		n Individual	Dobtor's Sak	andulan	
Declarati	ion About a	an maividuai	Debtor's Sch	<u>ieauies</u>	12/15
	3 U.S.C. §§ 152, 1341, 7				
Did you pay	or agree to pay some	eone who is NOT an attor	ney to help you fill out ba	nkruptcy forms?	
■ No					
☐ Yes. N	lame of person			Attach Bankrupto	y Petition Preparer's Notice,
_				Declaration, and	Signature (Official Form 119)
		that I have read the sum	mary and schedules filed	with this declaration an	d
that they are	true and correct.				
x ⋈~	a North		X		
	Thomas		Signature of D	ebtor 2	
Signatur	e of Debtor 1				
Date N	/larch 17, 2017		Date	-	

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Fill in this inform	nation to identify your	case:			
Debtor 1	Gina M Thomas				
	First Name	Middle Name	Last Name		
Debtor 2	pa,				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ban	nkruptcy Court for the:	NORTHERN DISTRIC	CT OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an amended filing
Official For	m 107				
Statement	of Financial A	Affairs for Indi	viduals Filing for	Bankruptcy	4/1
are true and corre with a bankruptcy	swers on this <i>Statem</i> ect. I understand that r	naking a false stateme	and any attachments, and I ent, concealing property, or c mprisonment for up to 20 ye	obtaining money or p	ty of perjury that the answers property by fraud in connection
de mi	House				
Gina M Thomas Signature of Deb		Sig	nature of Debtor 2		
Date March 17	7, 2017	Date	e		
Did you attach ad ■ No □ Yes	ditional pages to You	r Statement of Financi	al Affairs for Individuals Filin	ng for Bankruptcy (Ot	fficial Form 107)?
Did you pay or ag ■ No	ree to pay someone w	ho is not an attorney t	to help you fill out bankrupto	cy forms?	
■ No Yes. Name of P	Person Attach th	e Rankruntov Petition E	Preparer's Notice, Declaration,	and Signature (Official	Form 110)
- 163. Name of F	CISCII ALIACIT LI	ie bankiupity i etition r	reparer a Notice, Decidiation,	and Signature (Official	1 FUHH 1 19).

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)
(Signature Page)

Signed:	Jacob B. Davis 0070005
Gina M Thomas	Joseph R. Doyle 6279065
Debtor(s)	Attorney for the Debtor(s)
Do not sign this agreement if the amounts a	re blank.

Local Bankruptcy Form 23c

Date:

March 17 2017

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United States Bankruptcy Court Northern District of Illinois

Northern District of Hillings								
In re	Gina M Thomas		Case No.					
		Debtor(s)	Chapter 13					
	VEF	RIFICATION OF CREDITOR N	MATRIX					
		Number of Creditors:		6				
	The above-named Debtor(s) le (our) knowledge.	nereby verifies that the list of cred	itors is true and correct to t	he best of my				
Date:	March 17, 2017	Han Iben	No.					
		Gina M Thomas						
		Signature of Debtor						

Page 14 of 16 Document Model Plan ☐ Meyer 11/22/2013 ☐ Stearns □ Vaughn UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS In re: Case No. **Gina M Thomas** Debtors. Original Chapter 13 Plan, dated March 17, 2017 (Signature Page) Signatures Debtor(s) [Sign only if not represented by an attorney] Date **Debtor's Attorney** Date March 17, 2017 Joseph R. Doyle 6279065 Attorney Information Bizar & Doyle, LLC (name, address, 123 West Madison Street telephone, etc.) Suite 205 Chicago, IL 60602 312-427-3100 Fax: 312-427-5400 **Special Terms** [as provided in Paragraph G]

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	Gina M Thomas		Case No.			
		Debtor(s)	Chapter	13		
	DISCLOSURE OF COMPENSATI	ON OF ATTORNEY	FOR DE	BTOR(S)		
C	ompensation paid to me within one year before the filing of the r	to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that ation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to red on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:				
	For legal services, I have agreed to accept	\$		4,000.00		
	Prior to the filing of this statement I have received	\$		490.00		
	Balance Due	\$		3,510.00		
2. Т	he source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
. Т	he source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
. •	I have not agreed to share the above-disclosed compensation	with any other person unless th	ey are memb	pers and associates of my law firm.		
[☐ I have agreed to share the above-disclosed compensation with copy of the agreement, together with a list of the names of the	a person or persons who are no people sharing in the compens	ot members of sation is attac	or associates of my law firm. A ched.		
. I	n return for the above-disclosed fee, I have agreed to render lega	l service for all aspects of the b	ankruptcy ca	ase, including:		
a b c d	8	affairs and plan which may be	required;	• • •		
ь. В	By agreement with the debtor(s), the above-disclosed fee does not	include the following service:				
	CERT	IFICATION				
I this ba	certify that the foregoing is a complete statement of any agreement ankruptcy proceeding.		to me for re	presentation of the debtor(s) in		
Ma	arch 17, 2017					
Do	ate	Joseph R. Doyle 6279065	5			
		Signature of Attorney Bizar & Doyle, LLC				
		123 West Madison Street Suite 205	:			
		Chicago, IL 60602				
		312-427-3100 Fax: 312-4	27-5400			
		joe@bizardoylelaw.com Name of law firm				
		·· <i>y</i> ···· <i>y</i> ·····				

City of Chicago Dept of Finance 111 W Jackson Blvd Ste 600 Chicago, IL 60604

Credit Acceptance Po Box 513 Southfield, MI 48037

Credit Protection Asso 13355 Noel Rd Ste 2100 Dallas, TX 75240

Fed Loan Serv Po Box 60610 Harrisburg, PA 17106

Volkswagen PROVIDE STATEMENT SHOWING RECENT VALUE

Westlake Financial Svc 4751 Wilshire Bvld Los Angeles, CA 90010